



Please type a plus sign (+) inside this box →

+

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/824,286	
	Filing Date	04/02/2001	
	First Named Inventor	Burkly, Linda C.	
	Group Art Unit	1646	
	Examiner Name	Eileen B. O'Hara	
Total Number of Pages in This Submission	4	Attorney Docket Number	A006 US CON

RECEIVED
JUL 29 2002

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Certificate of Express Mailing
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is hereby authorized to charge any additional fees to Deposit Account number 02-2327.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Niki D. Cox, Reg. No. 42,446
Signature	<i>Niki Cox</i>
Date	July 23, 2002

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:	
Typed or printed name	
Signature	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

7-24-02

1686



Docket No. A006US CON

Applicant: Burkly et al.

Serial No.: 09/824,286

Filing Date: 04/02/2001

For: Common Gamma Chain Blocking Agents

RECEIVED

JUL 29 2002

TECH CENTER 1600/2900

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence:
Transmittal Form (1 pg.); Response to Restriction Requirement (2 pgs.); and a return receipt
postcard

is being deposited with the United States Postal Service under 37 CFR 1.10 as Express Mail
Label No. EL798594058US in an envelope addressed to:

Assistant Commissioner for Patents
Washington, D.C. 20231

on July 23, 2002
Date

Patricia Hofstetter
Patricia Hofstetter